

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF  
COMMITTEE (in full)☐(Check if name  
is changed)Example: If typing, type  
over the lines.

12FE4M5

Lobo PAC

ADDRESS (number and street)

PO Box 492

☐(Check if address  
is changed)

Albuquerque

CITY ▲

NM

STATE ▲

87103

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐(Check if address  
is changed)

lobopacnm@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address  
is changed)

2. DATE

MM / DD / YYYY  
07 / 05 / 2013

3. FEC IDENTIFICATION NUMBER ►

C C00497073

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James Carl Akins

Signature of Treasurer

James Carl Akins

[Electronically Filed]

Date

MM / DD / YYYY  
01 / 30 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)